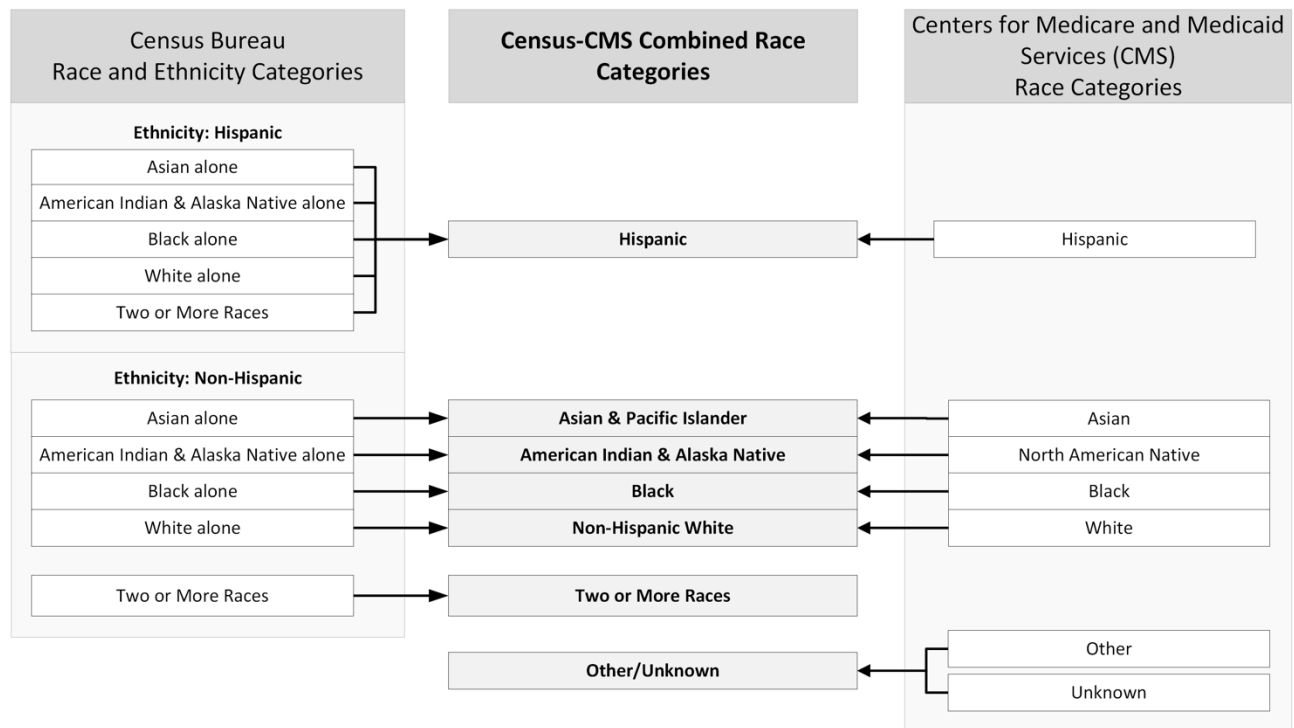


Appendix 1: The procedure for creating a race classification system that combines the Census race and ethnicity classification with the Centers for Medicare Services race classification



We calculated the prevalence of Alzheimer's disease and related dementias (ADRD) among Medicare fee for service (FFS) beneficiaries for 70 population subgroups defined by sex, age, and race and ethnicity. To calculate the total number of people with ADRD in each subgroup, we multiplied the prevalence estimates by the group-specific number of people in 2015 to 2060 using data published by the US Census Bureau population projections program. Because the Centers for Medicare and Medicaid Services (CMS) and the Census Bureau have different race and ethnicity categories, we created a new classification system by matching the name of the race category in the CMS data to the same (or similarly) named racial and ethnic category in the Census data.

The race categories in the CMS data are based on the Social Security Administration (SSA), which classifies US citizens into one of six mutually exclusive categories—White, Black, Asian, North American Native, Hispanic, other, or unknown. Prior to 1980, there were only three categories (white, negro (*sic*), or other). However, SSA only updates the race of a person when they apply for a replacement social security card or for benefits. The impact today is that the race for many people in the CMS data is still based on SSA's pre-1980 race classification system. Many Asian and Hispanic beneficiaries were classified as 'other' in the prior classification system. To address this problem, CMS developed an alternate race classification variable that reclassifies a beneficiary as Asian or Hispanic if their surname is found on a list of common Hispanic and Asian surnames. In a test using 2005 CMS FFS data, the procedure identified an additional 2.2 million beneficiaries as Hispanic and 0.3 million beneficiaries as Asian or Pacific Islanders; these represent 5.2% and 0.6% of all beneficiaries, respectively¹.

In the Census data, race is self-reported as white alone, black alone, Asian alone, American Indian and Alaska native (AIAN) alone, native Hawaiian and Pacific Islander (NHPI)

alone, or two or more races and ethnicity is self-reported as Hispanic or non-Hispanic. Race and ethnicity are not mutually exclusive categories. Since the CMS data relies on mutually exclusive categories, we reclassified any person whose ethnicity was Hispanic in the Census data into the Hispanic race category for the classification system that we developed for this analysis.

1. Eicheldinger C. More accurate racial and ethnic codes for Medicare administrative data. *Health care financing review*. 2008;29(3):27.